

Document ID: _____
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Data Extraction Template

Section 1: Document characteristics

1.1 Is the document a *primary* document or *secondary* document?

- *Primary* documents are full or stand-alone national or jurisdictional policy or strategy documents. Primary documents may be brief, but should be interpretable as a stand-alone document.
- *Secondary* documents accompany primary documents (e.g. info-graphics, summary pages, excerpts from primary documents) and do not represent the full policy or document.

primary secondary neither of these (provide explanation below)

Explanatory notes

1.2 Does the document (primary or secondary) describe a national or regional approach to prevention and/or management of non-communicable diseases (NCDs)?

yes → continue to 1.3

no → exclude the document and cease review of this document.

1.3 Policy/document title

Title in original language:

Title translated to English:

1.4 Country of origin

1.5 Language of original publication

1.6 Publication year

1.7 Publisher or auspicing organisation, including URL if available (i.e. please try and find the document online)

Publisher's name (in original language):

Publisher's name (translated to English):

URL of document (if available):

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Section 2: Data extraction

2.1 Does the policy/strategy explicitly state its purpose, aim or vision?

yes no

If yes, provide this here:

2.2 Is the policy targeted at the national or regional (e.g. state, jurisdictional, provincial) level?

national regional both unclear

2.3 Does the policy have a timespan stated?

yes no

If yes, provide dates here:

2.4 Is the policy focussed on NCD primary prevention, management of established disease, or both?

NCD prevention only NCD management only NCD prevention and management

2.5 Does the policy explicitly state that it aligns with the [WHO Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013–2020](#)? The Global Action Plan aims to reduce the burden of non-communicable diseases by 2025, through a set of nine global targets and 25 indicators.

yes no

2.6 Which health conditions does the focus of the policy refer to, or cover (explicitly or implicitly)?

2.7 If there is a background commentary to the policy, does it mention musculoskeletal conditions, mobility/functional impairment or persistent pain (e.g. within the context of important chronic conditions or burden of disease)?

yes no a background commentary is not provided

2.8 Does the policy explicitly mention anywhere coverage of the following conditions as being within the scope of non-communicable diseases prevention or management?

- musculoskeletal conditions of any kind? yes no
- mobility or functional impairment? yes no
- persistent pain unrelated to cancer? yes no

If yes (for any of the 3 options above), state the context in which these foci are mentioned and the conditions included (e.g. are they included in the context of NCDs, or common co-morbidities):

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If no (for any of the 3 options above, are musculoskeletal, mobility impairment or persistent pain conditions covered implicitly? yes no

Please explain:

2.9 Does the policy state its key objectives/aims and strategies/actions proposed to achieve the objectives/aims, as they relate to prevention/management of NCDs?

yes no

If yes, provide detail here in summary format with main focal areas and their components as they relate to NCDs. Please structure the information as a set of objectives/aims and under each aim, the particular strategies or actions proposed.

2.10 If yes to question 2.9, are any of the stated key objectives/aims and strategies/actions proposed to achieve the objectives/aims relevant (either directly or indirectly) to the prevention or management of musculoskeletal conditions, mobility/functional impairment or persistent pain unrelated to cancer?

yes all yes some no, none relevant

If 'yes some', which objectives/aim and strategies/actions are most relevant:

2.11 Does the policy provide any guidance on implementation to its end users for NCD prevention or management initiatives with respect to:

- Priorities for implementation yes no
- Timelines or phasing of implementation of the policy yes no
- Financing arrangements to support implementation yes no
- Responsible agencies yes no.

Please provide a summary that, where possible, covers these 4 dimensions.

If yes, provide summary here, particularly in relation to implementation plans as they relate to prevention or management of NCDs:

- Priorities for implementation
- Timelines or phasing of implementation of the policy
- Financing arrangements to support implementation
- Responsible agencies

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Section 3: Internal validity evaluation

The tool below is based on criteria developed in the literature¹⁻³ with the assessment criteria and scale based on Cheung et al². Definitions for assessment criteria are:

Fulfilled: *all* the mentioned criteria are addressed;

Room for improvement: some but not all the criteria are addressed

Not fulfilled or weak: no criteria are addressed

** if the response to the criteria is not stated, assume “not fulfilled or weak”

Domain descriptions (domain ‘A’ not included)	Assessment criteria		
	Fulfilled or strong (2)	Room for improvement (1)	Not fulfilled or weak (0)
B: Background and ‘case for change’			
The background commentary (e.g. Introduction) to the policy is: <ul style="list-style-type: none"> based on evidence from contemporary literature; and the scientific grounds are established to provide a compelling and objective ‘case for change’ (i.e. evidence or data are cited); and the source of the policy (e.g. decisions/goals) is clearly stated (e.g. from data analysis, authority, deduction). 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C: Goals			
The goals/objectives of the policy are: <ul style="list-style-type: none"> explicitly stated; and concrete enough to be evaluated; and oriented towards preventing or managing NCDs to improve health (i.e. person-centred) – that is, at least some of the goals need to be directed towards NCD care. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D: Resource considerations			
The policy considers: <ul style="list-style-type: none"> the cost of NCDs to the community (e.g. with health economic or other financial data); and estimated resources to support implementation of the policy; and human resources and organisational capacity to implement the policy. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E: Monitoring and evaluation			
The policy explicitly outlines: <ul style="list-style-type: none"> proposed monitoring and evaluation mechanisms; and outcome measures or indicators; and processes to support monitoring or evaluation (e.g. establishment of a monitoring committee, outcome measures identified for each action/objective). 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F: Public opportunity			
There is evidence that: <ul style="list-style-type: none"> the policy has been informed by meaningful engagement and consultation with a broad range of stakeholders (e.g. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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<p>consumers, clinicians, civil society, researchers, health decision-makers, funders; e.g. this may be obvious from the acknowledgements of list of contributors); and</p> <ul style="list-style-type: none"> • there is evidence that consultation outcomes have been integrated into the policy. 			
G: Obligations			
With respect to implementation, the obligations of various implementers are specified; i.e. who has to do what to implement the actions or achieve the objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H: Potential for public health impact			
<p>The policy specifically identifies:</p> <ul style="list-style-type: none"> • a target population, or health conditions or behaviours; and • proposed strategies that are related to NCDs (there may be some strategies unrelated to NCDs) align with best-practice management or standards of care for NCDs (e.g. informed by Models of Care, clinical guidelines, clear evidence sources). 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

References

1. Briggs AM, Jordan JE, Jennings M, et al. Supporting the evaluation and implementation of musculoskeletal Models of Care: A globally informed framework for judging readiness and success. *Arthritis Care Res* 2017;69:567-77.
2. Cheung KK, Mirzaei M, Leeder S. Health policy analysis: a tool to evaluate in policy documents the alignment between policy statements and intended outcomes. *Aust Health Rev* 2010;34:405-13.
3. Mahimbo A, Seale H, Heywood AE. Immunisation for refugees in Australia: a policy review and analysis across all States and Territories. *Australian and New Zealand Journal of Public Health* 2017;41:635-40.